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# Are Heart Transplant Recipients Receiving Cellular Memories from Their Donated Organ? A Heuristic Study

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*"If you wish to upset the law that all crows are black... it is enough if you prove one single crow to be white."*

William James

A fifty year old male heart transplant recipient awakened in a cold sweat the night after his operation. He told his nurses that he kept dreaming that he was falling down a flight of stairs. He

had reported no more pre-transplant anxiety than most recipients and no consultation from a psychiatrist or clergy was sought prior to his operation or that evening. When the same thing happened on the second and third night, a chaplain was called who in turn requested a psychiatric consultation. The psychiatrist reported that the patient was only bothered that he could not sleep well and attributed no particular significance to the dream. The patient reported that he had never himself fallen down stairs and was not aware of anyone who had. However, the clinical team was, in the words of the reporting psychiatrist, "a bit unnerved, because they knew the source of the heart." It had come from a coed who had passed out drunk in an upstairs bedroom at a fraternity party. When she awoke still intoxicated, she had fallen down a flight of stairs to her death.<sup>1</sup>

This case, like many of those reported by heart transplant recipients, cannot be considered evidential of "cellular memories." There are many possibilities that could explain this report, including but not limited to chance correlation of the dream with a current event, possible information leaked to the recipient on a conscious or subconscious level through television, newspaper accounts, or hospital staff, disrupted sleep or brain patterns related to medications and immunosuppressant drugs, emotional stress, or some pre-existing psychopathology or forgotten trauma.<sup>2,3</sup> But are there plausible hypotheses?

It has been assumed that learning primarily involves the nervous and immune systems and that the heart is merely a pump. Newly developing theories and research related to energy cardiology, neurocardiology, and cardioimmunology posit a broader view of the heart. Living systems theory suggests that all dynamical systems by definition contain recurrent feedback loops that store information and energy to various degrees that could relate to some form of cellular memory.<sup>4</sup> Microtubule memory may also involve some form of system memory process.<sup>5</sup>

Based on several published cases of heart transplant recipients experiencing various kinds and levels of associations with their donors, further study of the plausibility of some type of cellular

memory manifesting in these patients seems warranted.<sup>6</sup> In the most recently published set of cases of heart transplant/donor association, two to five parallels per case were observed between changes following surgery and the history of the donors.<sup>7</sup> These cases involved transcripts of audio taped interviews quoted verbatim and correlated with interviews with transplant recipients, recipient families or friends, and donor families or friends. Parallels included changes in food, music, art, sexual, recreation and career preferences, and specific instances of perceptions of names and sensory experiences related to the donors. (e.g. one donor was killed by a gun shot to the face; the recipient had dreams of seeing hot flashes of light in his face.) The total set of findings spanning the ten cases appear to indicate that coincidence or the statistical chance hypotheses may be insufficient to explain these phenomena.

Further study of the issue of cellular memory is difficult. Because of fear of ridicule and/or being seen as psychiatrically disturbed, recipients are often reluctant to share their stories. When they report them to me, it is often done with a sense of embarrassment and with the strictest assurance of confidentiality. When cases are reported at scientific meetings, they are often greeted not with appropriate skepticism and requests for more study but with cynicism, mockery, and unwillingness to consider possible explanations.

The limited number of cases this author has reported and their sporadic and clinical anecdotal nature do not allow conclusions regarding the cellular memory hypothesis. The true incidence of cardiac transplant patients associations with their donor is not known, but stress, illness, surgery, confrontation of mortality, immuno-suppressant drugs, and statistical coincidence seem insufficient to fully explain the 74 cases this author has reported to date. A few anecdotes are collection of stories, but many comparable anecdotes carefully collected and recorded over time become data worthy of examination. If cellular memory or any kind of verified association to an unknown donor is occurring in only some transplant patients, why this group? Is it possible that it is not the transplant, the organ itself, or cellular memory that are related to these stories but some intensified consciousness connection brought about or facilitated by the trauma of near death and the sudden miracle of the gift of a new life? It seems worth the time and attention of open-minded scientists to take a closer look at the white crows.

*Continued on p. 300*

creation of the NCCAM. JABSOM believes that it can be a leader in the United States, and internationally in the credible scientific study of alternative and complementary therapies. Furthermore, JABSOM believes that it is important to educate medical students about the therapies that their patients are using which may augment or detract from conventional allopathic medicine. For these reasons, we believe it is important to start a Department of Integrative Medicine at the John A. Burns School of Medicine.

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perceived effect. Another withdrawal was for travel. Ten patients completed the study.

Results obtained for the monitored parameters are summarized in Table 1. Thirty days of active magnet use improved pain, perception of function, and the range of motion of the joint, while reducing the duration of morning stiffness in the knee, and increasing the range of motion. No effect was noted on joint swelling, circumference, or time needed to walk 50 feet.

Cartilage, like bone, has piezoelectric properties leading to electrical outputs thought to be capable of stimulating chondrocyte synthesis of matrix components.<sup>5</sup> Similar electrical changes may occur through Faraday induction from applied time-varying electromagnetic fields. Complex chemical responses are detectable within 48 hours of PEMF exposure.<sup>6-8</sup>

Although pain, morning stiffness, and range of motion appear to be beneficially affected by the active field used in this study, further sampling with appropriate statistical evaluation is necessary for valid quantitative conclusions. Extended studies should be designed to histologically determine whether PEMF exposure has true chondroprotective or repair potential in the intact joint, or both.

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